| PART B - FEE(S) TRANSMITTAL | | | | | | |
|---|--|--|--|---|--|---|
| Complete and send | this form, together with applicable fee(s), to: Mail | | | Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 | | |
| . \. | | 1 1001 | or Fax | (703) 746-4000 | | |
| appropriate, All faither coindicated indess corrected maintenance fee notification | orm should be used for train orrespondence including the below or directed otherwise ons. | Patent, advance of in Block 1, by (a | JE FEE and PUBLIC rders and notification a) specifying a new o | of maintenance fees orrespondence address | will be mailed to the current; and/or (b) indicating a se | should be completed where nt correspondence address as parate "FEE ADDRESS" for |
| | CE ADDRESS (Nôte: Uke Block I för | any change of address) | | Note: A certificate of | mailing can only be used | for domestic mailings of the |
| 20995 7 | | Fee(s) Transmittal. The papers. Each addition have its own certificate | is certificate cannot be used al paper, such as an assigna e of mailing or transmission | for domestic mailings of the I for any other accompanying nent or formal drawing, must | | |
| | TENS OLSON & BE | AR LLP | | Ce | rtificate of Mailing or Tra | nsmission |
| 2040 MAIN STREET FOURTEENTH FLOOR | | | | I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below. | | |
| 03/22/2005 Chighten 12 60 00 00 037 10661414 | | | | | | |
| 03/2272005 CRGUYEN1-00000037 10661414 | | | | Michael 5. Okamoto #47,83) (Depositor's name) | | |
| 01 FC:1501 1400.00 DP | | | | | amsto | (Signature) |
| 02 FC:1504 03 FC:8001 | 9.00 OP | 300.00 OP 9.00 OP | | | 200 S | (Date) |
| APPLICATION NO. | FILING DATE | FIRST NAMED INVE | | TOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
| 10/661,414 | 09/12/2003 Fernando Go | | | z | MICRON.079DV1C1 | 6655 |
| TITLE OF INVENTION: MULTIPLE THICKNESS GATE DIBLECTRIC LAYERS | | | | | | |
| | , | | | | | |
| APPLN. TYPE | SMALL ENTITY | ISSUB FI | EB PL | BLICATION FEB | TOTAL FEE(S) DUE | DATE DUB |
| nonprovisional | NO | \$1400 | \$1400 | | \$1700 | 05/31/2005 |
| EXAMINER A | | ART UN | IT CI | ASS-SUBCLASS |] | |
| ABRAHAM, FETSUM | | 2826 | 26 257-411000 | | | |
| 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Knobbe Martens | | | | | | ho Martons |
| | dence address (or Change of 22) attached. | Correspondence | (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, | | | |
| | | | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to | | | |
| PTO/SB/47; Rev 03-02 Number is required. | tion (or "Fee Address" Indica or more recent) attached. Use | of a Customer | 2 registered patent attorneys or agents. If no name is listed, no name will be printed. | | | |
| 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) | | | | | | |
| PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. | | | | | | |
| (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) | | | | | | |
| MICRON TECHNOLOGY, INC. Boise, ID | | | | | | |
| Please check the appropriate assignee category or categories (will not be printed on the patent): | | | | | | |
| 4a. The following fee(s) are | | | . Payment of Fee(s): | a marviduar as c | orporation or other private g | roup entity Government |
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| Advance Order - # o | f Copies3 | | The Director is I | ereby authorized by c | harge the required fee(s), o | r credit any overpayment to copy of this form). |
| 5. Change in Entity Status | (from status indicated above | · · · · · · · · · · · · · · · · · · · | Doposit Flocount IVE | 1151410 | (chelose all catta | copy of this form). |
| a. Applicant claims S | MALL ENTITY status. See | 37 CFR 1.27. | b. Applicant is no | longer claiming SMA | LL ENTITY status. See 37 | CFR 1.27(g)(2). |
| The Director of the USPTO NOTE: The Issue Fee and I interest as shown by the rec | is requested to apply the Issue Publication Fee (if required) words of the United States Pate | ne Fee and Publicate vill not be accepted and Trademark | tion Fee (if any) or to I from anyone other the Office. | re-apply any previous an the applicant; a reg | y paid issue fee to the applicatered attorney or agent; or | cation identified above. the assignee or other party in |
| | 111:11 11 10 | note | | | | |
| Authorized Signature | Mishaal C. Ole | | 47,831 | Date | March 18,2005 No. 47,831 | |
| Typed or printed name _ | | | | | | |
| This collection of informati an application. Confidentia submitting the completed a this form and/or suggestion Box 1450, Alexandria, Virg Alexandria, Virginia 22313 | on 1s required by 37 CFR 1.3 lity is governed by 35 U.S.C. pplication form to the USPT is for reducing this burden, signia 22313-1450. DO NOT -1450. | | | | the public which is to file (a minutes to complete, includ omments on the amount of Trademark Office, U.S. De S. SEND TO: Commissione displays a valid OMB control of the c | nd by the USPTO to process) ing gathering, preparing, and time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450, |

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